PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/586338

		CLAIMS	AS FILED	- PART I	::::::			SMALL EN	TITY		OTHER	RTHAN
			. , (Colu	mņ 1)		(Column 2)		TYPE		OR		ENTITY
U.S. NATIONAL STAGE FEES							7	RATE	FEE		RATE	FEE
ВА	SIC FEE		SMALL ENT. = \$ 150		LAR	GE ENT. = \$ 300	1	BASIC FEE		OR	BASIC FEE	300
EX	AMINATION F	EE	Satisfies PCT Article 33(1)- (4) = \$50/\$100			other situations = \$ 100 / \$ 200	1	EXAM. FEE		1	EXAM. FEE	200
SE	ARCH FEE		U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400			other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH, FEE	400
FEI	FOR EXTRA	SPEC. PGS.	mi	nus 100 =	··· - 7 · · · ·	/ 50 =	1	X \$ 125 =		1	X \$ 250 =	
TO:	TAL CHARGE	ABLE CLAIMS	7 "	ninus 20 =	*			X \$ 25 =		OR	X \$ 50 =	
IND	EPENDENT C	LAIMS	ے	minus 3 =	*		1	X \$ 100 =		OR	X \$ 200 =	
MU	LTIPLE DEPE	NDENT CLAIM PI	RESENT	•	-	4		+ \$ 180 =		OR	+ \$ 360 =	360
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	260
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								SMALL E	ENTITY	OR	OTHER SMALL E	
NT A		CLAIMS REMAINING AFTER AMENDMENT	•	NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	•	=		X \$ 25 =		OR	X \$ 50 =	
AME	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
•								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Columi	a 2)	(Column 3)			-			
붉		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ST R ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				AIM			+ \$ 180 =		OR	+ \$ 360 =	
** (f the "Highest Nu	mn 1 is less than th mber Previously Pal	d For" IN THIS SE	PACE is less th	1an '20'	, enter "20".		FEE		OR -	FEE	
	-	mber Previously Paid nber Previously Paid					n the	appropriate box i	n column 1.			į